

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 24, 1999 8:00 am
Secretary of State

02-24-1999 90172 011 ***150.00

DOCUMENT # F95000000021

1. Corporation Name

PINNACLE REALTY MANAGEMENT COMPANY

Principal Place of Business

401 SECOND AVE S
STE 110
SEATTLE WA 98104
US

Mailing Address

401 SECOND AVE S
STE 110
SEATTLE WA 98104
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/03/1995

4. FEI Number

91-1661476

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME HARRELSON, STAN
STREET ADDRESS 401 SECOND AVE S STE 100
CITY-ST-ZIP SEATTLE WA

TITLE CEO ☐ DELETE

NAME GOODMAN, JOHN A
STREET ADDRESS 401 SECOND AVE S STE 110
CITY-ST-ZIP SEATTLE WA

TITLE D ☒ DELETE

NAME NOBLE, SCOTT C
STREET ADDRESS 38 PROSPECT ST
CITY-ST-ZIP HARTFORD CT

TITLE CFST ☐ DELETE

NAME MARKEY, DONALD J
STREET ADDRESS 401 SECOND AVE S STE 110
CITY-ST-ZIP SEATTLE WA

TITLE D ☐ DELETE

NAME CARTER, JAMES
STREET ADDRESS 38 PROSPECT ST
CITY-ST-ZIP HARTFORD CT

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President / CEO ☒ Change ☐ Addition

1.2 NAME Harrelson, Stan
1.3 STREET ADDRESS 401 2nd Ave S Suite 110
1.4 CITY-ST-ZIP Seattle, WA 98104

2.1 TITLE Director ☒ Change ☐ Addition

2.2 NAME Goodman, John A.
2.3 STREET ADDRESS 401 2nd Ave S Suite 110
2.4 CITY-ST-ZIP Seattle, WA 98104

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, on an attachment with an address, with all other like empowered.

SIGNATURE: *Donald J. Markey* REQUIRED *Donald J. Markey* 2-8-99 206-245-9780

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)